CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY TYPE OR			OTHER TI	
OTAL CLAIMS		14			RATE	FEE] [RATE	Ė
OR		NUMBER F	LED NUM	SER EXTRA	BASIC FEE	355.00	OR	BASIC FEE	. 7
OTAL CHARGEABLE CLAIMS		19 minu	rs 20= ' (Y	X\$ 9=		OR	X\$18=	•
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A STATE OF THE STATE OF			- '- (m) 60 mm		+135=		ΟÁ	+270∓	\$
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FIRST PRESENTATION OF MULTIPLE DEPENDENT, CLAIM					1	1 - 0 - 5	1.	1270-	Ŀ
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